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|--|-------------------------|---|
| UTILITY<br>PATENT APPLICATION<br>TRANSMITTAL | Attorney Docket No.:    | IS01301TC                                     |
|  | First Inventor:         | Seick, Ryan E. et al.                         |
|  | Title:                  | WIRELESS LOCAL AREA NETWORK VEHICULAR ADAPTER |
|  | Express Mail Label No.: | EU940604636US                                 |

(Only for new nonprovisional applications under 37 CFR 1.53(b))

|   |                                 |   |                 |
|---|---------------------------------|---|-----------------|
| APPLICATION ELEMENTS<br>(see MPEP chapter 600 concerning utility patent application contents)   |                                 | ADDRESS TO:<br>Mail Stop Patent Application<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450   |                 |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form in duplicate<br>(Submit an original and a duplicate for fee processing)<br>2. <input type="checkbox"/> Applicant claims small entity status<br>See 37 CFR 1.27<br>3. <input checked="" type="checkbox"/> Specification Total Pages <input type="text" value="13"/><br>(preferred arrangement set forth below)<br>-Descriptive title of the invention<br>-Cross Reference to Related Applications<br>-Statement Regarding Fed sponsored R&D<br>-Reference to sequence listing, a table,<br>-Background of the Invention<br>-Brief Summary of the Invention<br>-Brief Description of the Drawings (if filed)<br>-Detailed Description<br>-Claim(s)<br>-Abstract of the Disclosure<br>4. <input checked="" type="checkbox"/> Drawing(s) Total Sheets <input type="text" value="3"/><br>5. Oath or Declaration<br>a. <input checked="" type="checkbox"/> Newly executed (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/ divisional with Box 18 completed)<br>i. <input type="checkbox"/> DELETION OF INVENTOR(S)<br>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).<br>6. <input type="checkbox"/> Application Data Sheet under 37 CFR 1.76 |                                 | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)<br>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence (if applicable, all necessary)<br>a. <input type="checkbox"/> Computer Readable Form (CFR)<br>b. <input type="checkbox"/> Specification Sequence Listing on:<br>i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies);<br>ii. <input type="checkbox"/> or paper<br>c. <input type="checkbox"/> Statements verifying identify of above copies<br>ACCOMPANYING APPLICATION PARTS<br>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))<br>10. <input type="checkbox"/> 37 CFR 3.73(b) <input type="checkbox"/> Power of Attorney Statement (when there is an assignee)<br>11. <input type="checkbox"/> English Translation Document (if applicable)<br>12. <input checked="" type="checkbox"/> IDS <input type="checkbox"/> Copies of IDS Citations<br>13. <input type="checkbox"/> Preliminary Amendment<br>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br>15. <input type="checkbox"/> Certified Copy of Priority Document<br>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.<br>17. <input type="checkbox"/> Other: _____ |                 |
| 18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:<br><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in- Part (CIP) Prior Appl. No. <input type="text"/><br>Prior Appl. information: Examiner: <input type="text"/> Group/Art Unit: <input type="text"/><br>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.  |                                 |   |                 |
| 19. CORRESPONDENCE ADDRESS  |                                 |   |                 |
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label   |                                 | <input type="checkbox"/> Correspondence address below   |                 |
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| SIGNATURE   | Date                            |   | August 20, 2003 |

IS01301TC

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|--|--|--------------------------|--|-------------------------------|--|
| <b>FEE TRANSMITTAL</b><br><br>Patent fees are subject to annual revision |  | <b>Complete if Known</b> |  |                               |  |
|  |  | Application Number       |  |                               |  |
|  |  | Filing Date              |  | August 20, 2003               |  |
|  |  | First Named Inventor     |  | Seick, Ryan E. et al.         |  |
|  |  | Examiner Name            |  |                               |  |
|  |  | Group Art Unit           |  |                               |  |
| TOTAL AMOUNT OF PAYMENT  |  | (\$) <b>790.00</b>       |  | Attorney Docket No. IS01301TC |  |

  

| <b>METHOD OF PAYMENT</b>   | <b>FEE CALCULATION (continued)</b>   |              |          |  |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
|--|--|--------------|----------|--|----|-----------------|--|----------|----------|----------|----------|------|-----|------|----|-------------------------------------|--|------|----|------|----|-------------------------------------|--|------|-----|------|-----|---------------------------|--|------|------|------|------|---|--|------|------|------|------|--|--|------|-------|------|-------|---|--|------|-----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|------|------|-----|---|--|------|------|------|-----|--|--|------|-----|------|-----|------------------|--|------|-----|------|-----|--|--|------|-----|------|-----|--------------------------|--|------|------|------|------|---|--|------|-----|------|----|----------------------------------|--|------|------|------|-----|------------------------------------|--|------|------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|-------------------------------------|--|------|-----|------|-----|-------------------|--|------|----|------|----|--|----|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|---------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|------------------------------------|--|--|--|---------------------------------------|--|
| <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:</p> <p>Deposit Account Number <span style="border: 1px solid black; padding: 2px;"><b>50-2117</b></span></p> <p>Deposit Account Name <span style="border: 1px solid black; padding: 2px;"><b>Motorola, Inc.</b></span></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee required under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>2. <input type="checkbox"/> Payment Enclosed:</p> <p style="text-align: center;"> <input type="checkbox"/> Check            <input type="checkbox"/> Credit Card            <input type="checkbox"/> Money Order            <input type="checkbox"/> Other       </p> | <p><b>3. ADDITIONAL FEES</b></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2"></th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late Provisional filing</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for ex parte Reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>1970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1300</td><td>2453</td><td>650</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1300</td><td>2501</td><td>650</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502</td><td>470</td><td>2502</td><td>235</td><td>Design issue fee</td><td></td></tr> <tr><td>1503</td><td>630</td><td>2503</td><td>315</td><td>Plant issue fee</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of IDS</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td style="text-align: center;">40</td></tr> <tr><td>1809</td><td>750</td><td>2809</td><td>375</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>750</td><td>2810</td><td>375</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr> <tr><td>1801</td><td>750</td><td>2801</td><td>375</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr><td colspan="6">Other fee (specify) _____</td></tr> <tr><td colspan="6"> </td></tr> <tr><td colspan="6"> </td></tr> <tr><td colspan="6"> </td></tr> <tr><td colspan="6"> </td></tr> <tr> <td colspan="4">* Reduced by Basic Filing Fee paid</td> <td colspan="2"> <b>SUBTOTAL (3)</b>    (\$)<b>40.00</b> </td> </tr> </tbody> </table> | Large Entity |          | Small Entity   |    | Fee Description |  | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath |  | 1052 | 50 | 2052 | 25 | Surcharge - late Provisional filing |  | 1053 | 130 | 1053 | 130 | Non-English specification |  | 1812 | 2520 | 1812 | 2520 | For filing a request for ex parte Reexamination |  | 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action |  | 1805 | 1840* | 1805 | 1840* | Requesting publication of SIR after Examiner action |  | 1251 | 110 | 2251 | 55 | Extension for reply within first month |  | 1252 | 410 | 2252 | 205 | Extension for reply within second month |  | 1253 | 930 | 2253 | 465 | Extension for reply within third month |  | 1254 | 1450 | 2254 | 725 | Extension for reply within fourth month |  | 1255 | 1970 | 2255 | 985 | Extension for reply within fifth month |  | 1401 | 320 | 2401 | 160 | Notice of Appeal |  | 1402 | 320 | 2402 | 160 | Filing a brief in support of an appeal |  | 1403 | 280 | 2403 | 140 | Request for oral hearing |  | 1451 | 1510 | 1451 | 1510 | Petition to institute a public use proceeding |  | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable |  | 1453 | 1300 | 2453 | 650 | Petition to revive - unintentional |  | 1501 | 1300 | 2501 | 650 | Utility issue fee (or reissue) |  | 1502 | 470 | 2502 | 235 | Design issue fee |  | 1503 | 630 | 2503 | 315 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) |  | 1806 | 180 | 1806 | 180 | Submission of IDS |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 40 | 1809 | 750 | 2809 | 375 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 1810 | 750 | 2810 | 375 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 1801 | 750 | 2801 | 375 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  | Other fee (specify) _____ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | * Reduced by Basic Filing Fee paid |  |  |  | <b>SUBTOTAL (3)</b> (\$) <b>40.00</b> |  |
| Large Entity   |  | Small Entity |          | Fee Description  |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| Fee Code   | Fee (\$)   | Fee Code     | Fee (\$) |  |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1051   | 130  | 2051         | 65       | Surcharge - late filing fee or oath  |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1052   | 50   | 2052         | 25       | Surcharge - late Provisional filing  |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1053   | 130  | 1053         | 130      | Non-English specification  |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1812   | 2520   | 1812         | 2520     | For filing a request for ex parte Reexamination                            |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1804   | 920*   | 1804         | 920*     | Requesting publication of SIR prior to Examiner action                     |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1805   | 1840*  | 1805         | 1840*    | Requesting publication of SIR after Examiner action                        |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1251   | 110  | 2251         | 55       | Extension for reply within first month                                     |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1252   | 410  | 2252         | 205      | Extension for reply within second month                                    |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1253   | 930  | 2253         | 465      | Extension for reply within third month                                     |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1254   | 1450   | 2254         | 725      | Extension for reply within fourth month                                    |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1255   | 1970   | 2255         | 985      | Extension for reply within fifth month                                     |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1401   | 320  | 2401         | 160      | Notice of Appeal   |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1402   | 320  | 2402         | 160      | Filing a brief in support of an appeal                                     |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1403   | 280  | 2403         | 140      | Request for oral hearing   |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1451   | 1510   | 1451         | 1510     | Petition to institute a public use proceeding                              |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1452   | 110  | 2452         | 55       | Petition to revive - unavoidable   |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1453   | 1300   | 2453         | 650      | Petition to revive - unintentional   |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1501   | 1300   | 2501         | 650      | Utility issue fee (or reissue)   |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1502   | 470  | 2502         | 235      | Design issue fee   |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1503   | 630  | 2503         | 315      | Plant issue fee  |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1460   | 130  | 1460         | 130      | Petitions to the Commissioner  |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1807   | 50   | 1807         | 50       | Processing fee under 37 CFR 1.17(q)  |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1806   | 180  | 1806         | 180      | Submission of IDS  |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 8021   | 40   | 8021         | 40       | Recording each patent assignment per property (times number of properties) | 40 |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1809   | 750  | 2809         | 375      | Filing a submission after final rejection (37 CFR § 1.129(a))              |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1810   | 750  | 2810         | 375      | For each additional invention to be examined (37 CFR § 1.129(b))           |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1801   | 750  | 2801         | 375      | Request for Continued Examination (RCE)                                    |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| 1802   | 900  | 1802         | 900      | Request for expedited examination of a design application                  |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| Other fee (specify) _____  |  |              |          |  |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
|  |  |              |          |  |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
|  |  |              |          |  |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
|  |  |              |          |  |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
|  |  |              |          |  |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |
| * Reduced by Basic Filing Fee paid   |  |              |          | <b>SUBTOTAL (3)</b> (\$) <b>40.00</b>                                      |    |                 |  |          |          |          |          |      |     |      |    |                                     |  |      |    |      |    |                                     |  |      |     |      |     |                           |  |      |      |      |      |   |  |      |      |      |      |  |  |      |       |      |       |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |      |      |     |   |  |      |      |      |     |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |      |      |      |   |  |      |     |      |    |                                  |  |      |      |      |     |                                    |  |      |      |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |                   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |  |  |                                       |  |

  

| <b>1. BASIC FILING FEE</b>   |                   |                 |                   |   |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
|--|-------------------|-----------------|-------------------|---|-----------------|-----------------|------|-----|------|-----|------------------------|--------------------|------|------|------|-----------------------------------|--------------------|-----|------|-----|---------------------------------------|------|------------------|------|------|---|------|-----|--------------------|---|---|-----|------|----|------------------------|--|--|
| <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1001</td><td>750</td><td>2001</td><td>375</td><td>Utility filing fee</td><td style="text-align: center;">750</td></tr> <tr><td>1002</td><td>330</td><td>2002</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>520</td><td>2003</td><td>260</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>750</td><td>2004</td><td>375</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> </tbody> </table>  | Large Fee Code    | Entity Fee (\$) | Small Fee Code    | Entity Fee (\$)   | Fee Description | Fee Paid        | 1001 | 750 | 2001 | 375 | Utility filing fee     | 750                | 1002 | 330  | 2002 | 165                               | Design filing fee  |     | 1003 | 520 | 2003                                  | 260  | Plant filing fee |      | 1004 | 750   | 2004 | 375 | Reissue filing fee |   | 1005  | 160 | 2005 | 80 | Provisional filing fee |  | <b>SUBTOTAL (1)</b> (\$) <b>750.00</b> |
| Large Fee Code   | Entity Fee (\$)   | Small Fee Code  | Entity Fee (\$)   | Fee Description   | Fee Paid        |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| 1001   | 750               | 2001            | 375               | Utility filing fee  | 750             |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| 1002   | 330               | 2002            | 165               | Design filing fee   |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| 1003   | 520               | 2003            | 260               | Plant filing fee  |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| 1004   | 750               | 2004            | 375               | Reissue filing fee  |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| 1005   | 160               | 2005            | 80                | Provisional filing fee                                    |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| <b>2. EXTRA CLAIM FEES</b>   |                   |                 |                   |   |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Total Claims</th> <th>Previously Paid**</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">19</td> <td style="text-align: center;">20</td> <td style="text-align: center;">0</td> <td style="text-align: center;">18</td> <td style="text-align: center;">0</td> </tr> <tr> <td style="text-align: center;">Independent Claims</td> <td style="text-align: center;">3</td> <td style="text-align: center;">0</td> <td style="text-align: center;">84</td> <td style="text-align: center;">0</td> </tr> <tr> <td style="text-align: center;">Multiple Dependent</td> <td></td> <td></td> <td style="text-align: center;">280</td> <td style="text-align: center;">=</td> </tr> </tbody> </table> |                   | Total Claims    | Previously Paid** | Extra Claims  | Fee from below  | Fee Paid        | 19   | 20  | 0    | 18  | 0                      | Independent Claims | 3    | 0    | 84   | 0                                 | Multiple Dependent |     |      | 280 | =                                     |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| Total Claims   | Previously Paid** | Extra Claims    | Fee from below    | Fee Paid  |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| 19   | 20                | 0               | 18                | 0   |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| Independent Claims   | 3                 | 0               | 84                | 0   |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| Multiple Dependent   |                   |                 | 280               | =   |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
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| Large Fee Code   | Entity Fee (\$)   | Small Fee Code  | Entity Fee (\$)   | Fee Description   |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| 1202   | 18                | 2202            | 9                 | Claims in excess of 20                                    |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| 1201   | 84                | 2201            | 42                | Independent claims in excess of 3                         |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| 1203   | 280               | 2203            | 140               | Multiple dependent claim, if not paid                     |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| 1204   | 84                | 2204            | 42                | * Reissue independent claims over original patent         |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| 1205   | 18                | 2205            | 9                 | * Reissue claims in excess of 20 and over original patent |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| <b>SUBTOTAL (2)</b> (\$) <b>0.00</b>   |                   |                 |                   |   |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |
| **OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.<br>*For Reissues, see above   |                   |                 |                   |   |                 |                 |      |     |      |     |                        |                    |      |      |      |                                   |                    |     |      |     |                                       |      |                  |      |      |   |      |     |                    |   |   |     |      |    |                        |  |  |

  

|                     |                  |                                 |                 |
|---------------------|------------------|---------------------------------|-----------------|
| <b>SUBMITTED BY</b> |                  | <b>Complete (if applicable)</b> |                 |
| Name (Print/Type)   | Brian M. Mancini | Registration No.                | 39,288          |
| Signature           |                  | Telephone                       | 847-576-3992    |
|                     |                  | Date                            | August 20, 2003 |